FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12^h, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State

Reset Form

Parties must be filed electronically.

CAMPAIGE TH	ICS AND
2010 JAH 19	AM 10: 46

		=			
COMMITTEE NAME (Must be same as on Statement of Orga		FORM			
FRANKLIN COUNTY REPUBLICAN CENTRAL COM		•	nieci ńęlije		
IMPORTANT: Indicate by # type of committee you are reporting for: (1) StatewidenLegislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Cendidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue			DR-2 (Rev. 12/2009) DISCLOSURE REPORT For Office Use Only Comm. #		
CANDIDATE COMMITTEES ONLY:			gged in MM		
Candidate Name	Political Party (if applicable)	Sc	Scenned		
Office Sought District (if Senate or House)			Audited		
Late reports are subject to possible civil and oriminal penalties. Pur conditions are subject to possible civil and oriminal penalties. Pur conditions sycommittee, and the chairperson, for any other type of conditions are subject to the chairperson of the chai	swant to lowa Code sections 688,32A committee, is the individual responsible 64/-456-2383 TELEPHONE	e for filling til	mely and accum	itė reports.	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED	
I AM FILING A JANUARY 1 - DECEMBER 31, 2009	REPORT FOR (1) ELECTION	//2\MON_E	ELECTION YE	∆ ₽	
(report date)	Indicate by		ZEEO I ION TE		
CHECK IF AMENDMENT TO REPORT DATED		Local Comr	nittees, enter Da	to of Election	
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3.	County & U which Elect		, enter County in	
STATEMENT OF CASH ON HAND					
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fi	cash on hand at the end	\$	2,877.00		
ADD TOTAL MONEY TAKEN IN THIS PERIOD			926.00		
Schedule A: Cash Contributions total (Attach Sched			835.00		
Schedule F: Loans Received total (Attach Schedule	F)	•••••	0.00		
Schedule H: Total Sales of Campaign Property (Atta	ach Schedule H)		0.00		
(Schedule H applies to Candidates' Com	<u>mittees Only)</u> SUB-TOTAL	.	3,712.00		
	***	,			
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			268.56		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)			0.00		
Schedule F: Loan Repayments total (Attach Schedule F)			3,443,44		
**UNPAID BILLS (From Schedule D - Attach Schedule D)					
TIN KIND CONTRIBUTIONS (From Schedule E - Attach Sche					
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	<i>i</i> le F)	\$			
CONSULTANT BREAKDOWN (Schedule G Attached?)		-	YES	NO	
CANDIDATE COMMITTEES ONLY:					
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Att	sch Schedule H)	\$,	
STATE COMMITTEES: Submit a reconciled campaign according					

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD,

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/27/2 009	CK#	DENNY EDWARDS, PO BOX 497 HAMPTON IA 50441	:	\$100.00	
7/28/2009	ID#	VIRGINIA STOCKDALE, 572 LEMON AVE IOWA FALLS IA 50126		100.00	
7/28/2009	ID# CK#	MRS EUGENE SUKUP, BEEDS LAKE HAMPTON IA 50441		100.00	
7/29/2009	ID# CK#	MRS R W MCCORMICK, 314 16TH AVE NE HAMPTON IA 50441		10.00	
7/29/2009	ID# CK#	HELEN O'DEA, 614 1ST ST NE HAMPTON IA 50441		25.00	
7/29/2009	ID# CK#	MRS JOHN M LAIPPLE, 120 1ST AVE SE HAMPTON IA 50441	:	50.00	
7/29/2009	ID# CK#	MRS JAMES JORGENSEN JR, 1012 LARK AVE HAMPTON JA 50441		100.00	
7/29/2009	ID# CK#	SARAH H VAN WERT, 1524 SPRUCE AVE HAMPTON IA 50441		100.00	
8/4/2009	ID# CK#	JOAN M COONLEY, 21 5TH ST SE HAMPTON IA 50441		100.00	
8/4/2009	ID# CK#	KENT MOLLENBECK, 1476 190TH ST HAMPTON IA 50441		50.00	
			SUB-TOTAL	\$ 735.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no farmillal relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE

1	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISER INCOME
	ID#	TERRY I DI ACCE DO DOVECE			T
9/11/2009	CK#	JERRY L PLAGGE, PO BOX 565 LATIMER IA 50452		\$100.00	L
	ID#		:		
	CK#				L
	ID#				Г
	CK#		·		
	ID#				
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• • • • • • • • • • • • • • • • • • • •	<u> </u>		SUB-TOTAL	\$ 100.00	
		TOTAL (if lest pa	ge of this schedule)	\$ 835.00	1

* Disclosure lew requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguintly (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
(Rev. 07/03)	MONETARY EXPENDITURES
Псне	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/14/2009	ID# CK#792	FRANKLIN CO FAIR PO BOX 442 HAMPTON IA 50441	BOOTH AND TABLE	\$ 180.00
7/27/2009	ID# CK# 793	DICK NELSON 21 FIRST AVE SE HAMPTON IA 50441	STAMPS, STATIONERY, ENVELOPES, INK	68.56
8/7/2009	ID# CK# 794	FRANKLIN CO FAIR PO BOX 442 HAMPTON IA 50441	EXTRA TABLE	20.00
	ID# CK#			
	ID# CK#			
	fD# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$
			TOTAL (if last page of this schedule)	\$ 268.56

TOTAL (if last	page 4	of this	sched	ule

9 \$ 268.56

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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